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BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747
Telephone: (703) 205-8000 • Facsimile: (703) 205-8090

SUPPLEMENTAL COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT AND DESIGN APPLICATIONS

As below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Inventor's Name:

AISOPRIVITY IMPARTING AGENT CONTAINING POROUS SILICA

Title of Application:

the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:

Information -

For Use Without

Specification

Attached:

The specification was filed on August 4, 2006

United States Application Number

and amended on August 4, 2006the specification was filed on February 3, 2005International Application Number PCV/JP2005/001619

and was amended on _____

as

, if applicable)

and/or

as FCI

, if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 35, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than three years prior to this application, that the invention has not been patented or made the subject of an issued patent or certificate issued before the date of filing of this application, that the assigned Specification or any application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows:

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s):

Priority Claimed

Inventor Priority
Information
(if appropriate)

<u>2004-129971</u> (Number)	<u>Japan</u> (Country)	<u>February 3, 2004</u> (Month/Day/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>2004-029973</u> (Number)	<u>Japan</u> (Country)	<u>February 5, 2004</u> (Month/Day/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>2004-129974</u> (Number)	<u>Japan</u> (Country)	<u>February 5, 2004</u> (Month/Day/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>2004-029980</u> (Number)	<u>Japan</u> (Country)	<u>February 5, 2004</u> (Month/Day/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>2004-029982</u> (Number)	<u>Japan</u> (Country)	<u>February 5, 2004</u> (Month/Day/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>2004-129985</u> (Number)	<u>Japan</u> (Country)	<u>February 5, 2004</u> (Month/Day/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>2004-220912</u> (Number)	<u>Japan</u> (Country)	<u>July 26, 2004</u> (Month/Day/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below:

Inventor Provisional
Application(s)
(if any)

<u>(Application Number)</u>	<u>(Filing Date)</u>
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All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

Inventor Requested
Information
(if appropriate)
Page 1 of 2

<u>Country</u>	<u>Application Number</u>	<u>Date of Filing (Month/Day/Year)</u>

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioner, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292; (BIRCH, STEWART, KOLASCH & BIRCH, LLP)
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

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↓

Full Name of Physician or Solo Inventor:
Insert Name of Inventor:
Insert Name Title:
Document to Sign:

Insert Residence:

Insert Post Office Address:

Full Name of Second Inventor, if any:
see above

Full Name of Third Inventor, if any:
see above

Full Name of Fourth Inventor, if any:
see above

Full Name of Fifth Inventor, if any:
see above

Full Name of Sixth Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Konouchi KITAHATA		
Residence (City, State & Country) Yokkaichi-shi, Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o Taiyo Kagaku Co., Ltd.; 9-5, Akahorishimachi, Yokkaichi-shi Mie; 510-0825; JAPAN		
GIVEN NAME/FAMILY NAME Masaeaki YANAGI	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Yokkaichi-shi, Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o Taiyo Kagaku Co., Ltd.; 9-5, Akahorishimachi, Yokkaichi-shi Mie; 510-0825; JAPAN		
GIVEN NAME/FAMILY NAME Yukiaki KASAMA	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Yokkaichi-shi, Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o Taiyo Kagaku Co., Ltd.; 9-5, Akahorishimachi, Yokkaichi-shi Mie; 510-0825; JAPAN		
GIVEN NAME/FAMILY NAME Norifumi NOMURA	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Yokkaichi-shi, Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o Taiyo Kagaku Co., Ltd.; 9-5, Akahorishimachi, Yokkaichi-shi Mie; 510-0825; JAPAN		
GIVEN NAME/FAMILY NAME Kanae TERAMOTO	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Yokkaichi-shi, Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o Taiyo Kagaku Co., Ltd.; 9-5, Akahorishimachi, Yokkaichi-shi Mie; 510-0825; JAPAN		
GIVEN NAME/FAMILY NAME Hironobu NANBU	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Yokkaichi-shi, Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o Taiyo Kagaku Co., Ltd.; 9-5, Akahorishimachi, Yokkaichi-shi Mie; 510-0825; JAPAN		

*DATE OF SIGNATURE

Full Name of Secondary Inventor, if any; see above	GIVEN NAME/FAMILY NAME Yoshiki YAMAZAKI	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) Yokkaichi-shi, Japan		CITIZENSHIP* Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) c/o Taiyo Kagaku Co., Ltd.; 9-5, Akahorishinmachi; Yokkaichi-shi Mie 510-0825; JAPAN			
Full Name of Third Inventor, if any; see above	GIVEN NAME/FAMILY NAME Mitsunasa HORII	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) Aichi-gun, Aichi, Japan		CITIZENSHIP* Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 15-1, Azu Nishijima, Oaza Nagakute, Nagakute-cho, Aichi-gun, Aichi; 480-1131; JAPAN			
Full Name of Fourth Inventor, if any; see above	GIVEN NAME/FAMILY NAME Yoshiaki FUKUSHIMA	INVENTOR'S SIGNATURE <i>[Signature]</i>	DATE* Sept 24, 2006
	Residence (City, State & Country) Aichi-gun, Aichi, Japan		CITIZENSHIP* Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 1407, Yamamoto, Nagakute-cho, Aichi-gun, Aichi; 480-1113; JAPAN			
Full Name of Fifth Inventor, if any; see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country)		CITIZENSHIP*
MAILING ADDRESS (Complete Street Address including City, State & Country)			
Full Name of Sixth Inventor, if any; see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country)		CITIZENSHIP*
MAILING ADDRESS (Complete Street Address including City, State & Country)			
Full Name of Seventh Inventor, if any; see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country)		CITIZENSHIP*
MAILING ADDRESS (Complete Street Address including City, State & Country)			

*DATE OF SIGNATURE